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ATTORNEYS AT LAW  
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**Attorneys:**

JOHN J. ARNOTT, P.C.  
GREGORY M. HOWISON, P.C.  
BRIAN D. WALKER, P.C.  
DAVID G. WOODRAL

Direct Dial (972) 680-6050  
email: ghowison@dalpat.com

TWO LINCOLN CENTRE  
5420 LBJ Freeway, Suite 660  
Dallas, Texas 75240-2318  
Telephone (972) 479-0462  
Facsimile (972) 479-0464

Austin Office:  
Telephone (512) 328-3994

August 26, 2005

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YES \_\_\_ NO X\_\_\_

NUMBER OF PAGES TO FOLLOW 4

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**DATE:** August 26, 2005  
**TO:** BOX ISSUE FEE (Hong Sol Cho 2662)  
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**FAX NUMBER:** Centralized fax number: (571) 273-8300  
**FROM:** Howison & Arnott, L.L.P. (Gregory Howison)  
**SERIAL NO.:** 09/841,135  
**OUR FILE :** ATTA-25,441  
**ATTACHED:** Transmittal (1); Fee Transmittal (1); PTOL-85 (1); Credit Card Form (1).

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# TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number	09/841,135
Filing Date	04/24/2001
First Named Inventor	Diana L. Peterson
Art Unit	2862
Examiner Name	Hong Sol Cho
Attorney Docket Number	ATTA-25,441

## ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTOL-85; Credit Card Form.
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Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	HOWISON & ARNO, LLP.		
Signature			
Printed name	Gregory M. Howison		
Date	8/26/05	Reg. No.	30,646

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